

APPLICATION SERIAL NO. 10/601,090

PATENT

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Applicant: Viscor, et al. Examiner: Zia R. Hashmi
Serial No.: 10/601090 Group Art Unit: 2881
Filed: June 20, 2003 Docket No.: 01760.0001-US-01
Title: PLANAR ELECTRON EMITTER WITH EXTENDED LIFETIME AND
SYSTEM USING SAME

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Commissioner for Patents
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Sir:

This Reply is submitted in response to the non-final Office Action dated May 19, 2004, setting a three month shortened statutory period for response that expires on August 19, 2004. As there are no amendments to the claims, no listing of claims is provided. Remarks begin on page 2. This Reply contains no amendments to the specification or drawings. Further examination and reconsideration are respectfully requested.

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PTO/SB/21 (02-04)

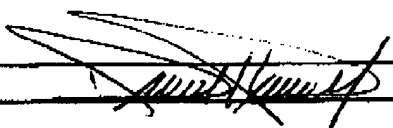
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/601,090
	Filing Date	June 20, 2003
	First Named Inventor	Petr Viscor
	Art Unit	2881
	Examiner Name	Zia R. Hashmi
Total Number of Pages in This Submission	12	Attorney Docket Number: 01760.0001-US-01

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form (1 page) <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply (10 pages) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	David H. Carroll
Signature	
Date	August 19, 2004

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Date	August 19, 2004

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